

16085 U.S. PTO
012304

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

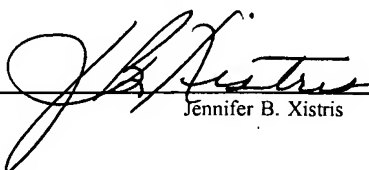
Box Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of Kurt Eakle, Thomas Hope, Eun-A Choi, Jane Homan and Robert D. Bremel for Transgenic Animals Expressing Transdominant Negative Retroviral Nucleic Acids And Proteins.

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the U.S. Postal Service on this date January 23, 2004 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EL 992 783 898 US addressed to: Box Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Jennifer B. Xistris

22581 U.S. PTO
10/764201
012304

1. **Type Of Application**
This new application is for a(n)
☒ Original (nonprovisional)
2. **Papers Enclosed That Are Required For Filing Date Under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153 (Design) Application**
62 Pages of Specification
3 Pages of Claims
1 Page of Abstract
23 Sheets of Informal Drawings
3. **Declaration**
☒ Not Enclosed
4. **Inventorship Statement**
The inventorship for all the claims in this application is:
☒ the same
5. **Language**
☒ English
6. **Fee Calculation (37 C.F.R. § 1.16)**
☒ Regular application

CLAIMS AS FILED

Number Filed	Number Extra	Rate	Basic Fee - \$770.00 (37 C.F.R. § 1.16(a))
Total Claims (37 C.F.R. § 1.16(c))	29 - 20 =	9 × \$18.00 =	\$162.00
Independent Claims (37 C.F.R. § 1.16(b))	6 - 3 =	3 × \$86.00 =	\$258.00
Multiple Dependent Claim(s), if any (37 C.F.R. § 1.16(d))	+ \$290.00 =		\$0.00

Filing Fee Calculation \$1190.00

7. **Fee Payment Being Made At This Time**

- ☒ Enclosed
- ☒ basic filing fee \$1190.00
- Total Fees Enclosed \$1190.00**

8. **Method of Payment of Fees**

- ☒ Check in the amount of \$1190.00

9. **Authorization To Charge Additional Fees and Credit Overpayment***

- ☒ The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No.: **08-1290**. An originally executed duplicate of this transmittal is enclosed for this purpose.

10. **Power of Attorney by Assignee**

- ☒ Enclosed (unexecuted)

11. **Return Receipt Postcard**

- ☒ Enclosed

Dated: January 23, 2004



Tanya A. Arenson
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☒ **Statement Where No Further Pages Added**

- ☒ This transmittal ends with this page.